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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number **PD-99W171**

First Named Inventor **Kellman**

COMPLETE IF KNOWN

Application Number /

Filing Date

Art Unit

Examiner Name

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**System and Method for Representation of Aircraft Altitude Using Spatial Size
and Other Natural Perceptual Cues**

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 3]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☐ Customer Number **23915** OR ☒ Correspondence address below
or Bar Code Label

Name
Leonard A. Alkov
Raytheon Company

Address
P.O. Box 902 (E1/E150)

City **El Segundo** **State** **CA** **ZIP** **90245-0902**

Country **USA** **Telephone** **310.647.2577** **Fax** **310.647.2616**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR : ☐ A petition has been filed for this unsigned inventor

Given Name **Phillip J.** **Family Name** **Kellman**
(first and middle [if any]) or Surname

Inventor's **Date**
Signature

Residence: City **Pacific Palisades** **State** **CA** **Country** **USA** **Citizenship** **USA**

Mailing Address **922 Las Lomas Avenue**

City **Pacific Palisades** **State** **CA** **ZIP** **90272** **Country** **USA**

NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventor

Given Name **Timothy C.** **Family Name** **Clausner**
(first and middle [if any]) or Surname

Inventor's **Date**
Signature

Residence: City **Los Angeles** **State** **CA** **Country** **USA** **Citizenship** **USA**

Mailing Address **976 So. Westgate Avenue, #5**

City **Los Angeles** **State** **CA** **ZIP** **90049** **Country** **USA**

☒ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box → ☐

PTO/SB/02A (3-97)
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ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 3 of 3

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Evan M.

Palmer

Inventor's
Signature

Evan M. Hughes Palmer

Date

1/9/02

Residence: City

Venice

State

CA

Country

USA

Citizenship

USA

Post Office Address

319 Ocean Front Walk, #2

Post Office Address

City

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90291

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Given Name (first and middle [if any]) **Phillip J.** Family Name or Surname **Kellman**

Inventor's Signature _____ Date _____

Residence: City **Pacific Palisades** State **CA** Country **USA** Citizenship **USA**

Mailing Address **922 Las Lomas Avenue**

City **Pacific Palisades** State **CA** ZIP **90272** Country **USA**

NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) **Timothy C.** Family Name or Surname **Clausner**

Inventor's Signature *Timothy C. Clausner* Date *23 January 2002*

Residence: City **Los Angeles** State **CA** Country **USA** Citizenship **USA**

Mailing Address **976 So. Westgate Avenue, #5**

City **Los Angeles** State **CA** ZIP **90049** Country **USA**

☒ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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Supplemental Sheet
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Given Name (first and middle [if any])

Family Name or Surname

Evan M.

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Inventor's
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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	Kellman
Title	
Group Art Unit	
Examiner Name	
Attorney Docket Number	PD-99W171

I hereby appoint:

☐ Practitioners at Customer Number

23915

Place Customer
Number Bar Code
Label here

☒ Practitioner(s) named below:

Name	Registration Number
Leonard A. Alkov	30.021
Glenn H. Lenzen, Jr.	29,320
Colin M. Raufer	40,781
William C. Schubert	30.102

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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OR

☐ Practitioners at Customer Number

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☒ Firm or
Individual Name

Leonard A. Alkov

Address

Raytheon Company

Address

P.O. Box 902 (E1/E150)

City

El Segundo

State

CA

Zip

90245-0902

Country

USA

Telephone

310.647.2577

Fax

310.647.2616

I am the:

☐ Applicant/Inventor.

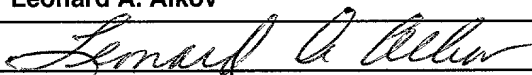
☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Leonard A. Alkov

Signature



Date

02/08/2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 forms are submitted.

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NAME OF SOLE OR FIRST INVENTOR : ☐ A petition has been filed for this unsigned inventor

Given Name **Philip J.** Family Name **Kellman**
(first and middle [if any]) or Surname

Inventor's Signature *Philip J. Kellman* Date **1/30/02**

Residence: City **Pacific Palisades** State **CA** Country **USA** Citizenship **USA**

Mailing Address **922 Las Lomas Avenue**

City **Pacific Palisades** State **CA** ZIP **90272** Country **USA**

NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventor

Given Name **Timothy C.** Family Name **Clausner**
(first and middle [if any]) or Surname

Inventor's Signature _____ Date _____

Residence: City **Los Angeles** State **CA** Country **USA** Citizenship **USA**

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